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PATENT - POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Patent Number	6,805,688
	Issue Date	October 19, 2004
	First Named Inventor	Helmut Wollschlager
	Title	Method and Device for Use in Micro-Invasive Surgical Procedures, and Catheter and Method for Use
	Attorney Docket Number	RAC-P0090-US

I hereby revoke all previous powers of attorney given in the above-identified patent.

☐ A Power of Attorney is submitted herewith.

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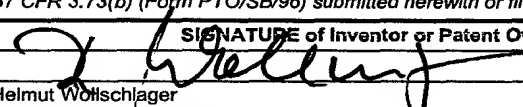
☒ Inventor, having ownership of the patent.

OR

☐ Patent owner.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Inventor or Patent Owner

Signature		Date	Oct 4, 2010
Name	Helmut Wollschlager	Telephone	+49 9621 381231
Title and Company	Inventor and Patent Owner		

NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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